

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Fresenius Medical Care North America PAC

ADDRESS (number and street) ▼

801 Pennsylvania Avenue, NW

Suite 255

☐ Check if different than previously reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00401299

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☒ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Eric Bishop

Signature of Treasurer

Eric Bishop

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Fresenius Medical Care North America PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 11 / 25 / 2014 To: M M / D D / Y Y Y Y Y 12 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		50251.20
(b) Cash on Hand at Beginning of Reporting Period.....	82533.34	
(c) Total Receipts (from Line 19)	17390.98	162349.62
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	99924.32	212600.82
7. Total Disbursements (from Line 31)	6162.28	118838.78
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	93762.04	93762.04
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Fresenius Medical Care North America PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	14967.48	124820.58
(ii) Unitemized	1992.45	34544.84
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	16959.93	159365.42
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	16959.93	159365.42
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	431.05	1984.20
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	17390.98	162349.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17390.98	162349.62

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	162.28	1858.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	162.28	1858.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	116500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	480.76
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	480.76
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6162.28	118838.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6162.28	118838.78

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	16959.93	159365.42
34. Total Contribution Refunds (from Line 28(d))	0.00	480.76
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16959.93	158884.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	162.28	1858.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	162.28	1858.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 47
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Lisa Dombro

Mailing Address 927 Prairie Avenue

City State Zip Code
 Park Ridge IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.06

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR110048115428

Amount of Each Receipt this Period

769.24

P/R Deduction (\$384.62 Monthly)

Full Name (Last, First, Middle Initial)

B. Karen Butler

Mailing Address 920 Winter Street

City State Zip Code
 Waltham MA 02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Director Clinical Technology Tr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR117492115428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Tracey E Ramsey Abbott

Mailing Address 8620 Burnet Rd, Suite 400

City State Zip Code
 Austin TX 78757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

RN COM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR117492315428

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

889.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Stephanie DeFranco

Mailing Address 525 Sycamore Drive

City Milpitas State CA Zip Code 95035

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director, New Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 31 / 2014

Transaction ID : PR117492615428

Amount of Each Receipt this Period

153.84

P/R Deduction (\$76.92 Monthly)

Full Name (Last, First, Middle Initial)

B. Mark Jacobs

Mailing Address 405 War Eagle Ln

City Yukon State OK Zip Code 73099

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

12 / 31 / 2014

Transaction ID : PR117492715428

Amount of Each Receipt this Period

30.80

P/R Deduction (\$15.40 Monthly)

Full Name (Last, First, Middle Initial)

C. Kathleen Kawa

Mailing Address 90 Glacier Avenue

City Westwood State MA Zip Code 02090

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Director of Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR117493015428

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

284.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Ronald Graham

Mailing Address 920 Winter Street

City

Waltham

State

MA

Zip Code

02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr. Benefits Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR117493115428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$10.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Julia Brennan

Mailing Address 8 King Road

City

Rockleigh

State

NJ

Zip Code

07647

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Business Relations Spectra Labs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR117493515428

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Richard Alderson

Mailing Address One Cityplace Drive

City

St. Louis

State

MO

Zip Code

63141

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR117601515428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Donald N Cantalupo

Mailing Address 100 Patterson Plank Rd, #313

City State Zip Code
 Jersey City NJ 07307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

RSM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR117601815428

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Nelson Coimbre

Mailing Address 2219 Hollywood Blvd, Suite 101

City State Zip Code
 Hollywood FL 33020

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Construction Estimator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.13

Date of Receipt

12 / 31 / 2014

Transaction ID : PR117601915428

Amount of Each Receipt this Period

69.24

P/R Deduction (\$34.62 Monthly)

Full Name (Last, First, Middle Initial)

C. Michelle Cowens

Mailing Address 516 Goldenwest

City State Zip Code
 Huntington Beach CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Vice President, Physician Practice Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 31 / 2014

Transaction ID : PR117602015428

Amount of Each Receipt this Period

153.84

P/R Deduction (\$76.92 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

323.08

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Robert D Crick

Mailing Address 3501 Moyers Circle, Suite 200

City State Zip Code
Masonic Home KY 40041

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

RVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR117602115428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

Full Name (Last, First, Middle Initial)

B. Clifton L Highman

Mailing Address 5251 DTC Parkway, Suite 500

City State Zip Code
Greenwood Village CO 80031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Mrg Planning & Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR117602215428

Amount of Each Receipt this Period

32.00

P/R Deduction (\$16.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Joseph H Johnston

Mailing Address 920 Winter Street

City State Zip Code
Waltham MA 02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr VP of Biomedical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR117602315428

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

208.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Kimberly Tecca

Mailing Address 1402 Modeste Dr

City State Zip Code
 League City TX 77573

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Regulatory Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR117602415428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Jeffrey Perritano

Mailing Address 111 E Elizabeth

City State Zip Code
 Clinton NC 28328

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR117631415428

Amount of Each Receipt this Period

46.12

P/R Deduction (\$23.06 Monthly)

Full Name (Last, First, Middle Initial)

C. Joseph Ruma

Mailing Address 920 Winter Street

City State Zip Code
 Waltham MA 02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Development Acquisitions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR120637115428

Amount of Each Receipt this Period

120.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

206.12

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Brian Silva

Mailing Address 920 Winter Street

City

Waltham

State

MA

Zip Code

02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

SVP, Human Resources & Admin

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4615.44

Date of Receipt

12 / 31 / 2014

Transaction ID : PR124957115428

Amount of Each Receipt this Period

769.24

P/R Deduction (\$384.62 Monthly)

Full Name (Last, First, Middle Initial)

B. Marion Andersen

Mailing Address 475 West 13th Street

City

Ogden

State

UT

Zip Code

84404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Principal Scientist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

340.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR127647315428

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Grant Asay

Mailing Address 1421 Champion Forest Ct

City

Wheaton

State

IL

Zip Code

60187

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

General Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

307.68

Date of Receipt

12 / 31 / 2014

Transaction ID : PR127647415428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

926.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Robert Scott Knox

Mailing Address 900 Circle 75 Pkwy SE, Suite 1080

City State Zip Code
 Atlanta GA 30022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr. Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.91

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR127647715428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

Full Name (Last, First, Middle Initial)

B. Cynthia LaMunyon

Mailing Address 225 E. Germann Road #230

City State Zip Code
 Gilbert AZ 85297

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr. Director of Reimbursement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR127647915428

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Douglas G. Kott

Mailing Address 211 Claybook Rd.

City State Zip Code
 Dover MA 02030-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.81

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR78835815428

Amount of Each Receipt this Period

769.20

P/R Deduction (\$384.60 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

906.12

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Nicholas Brownlee

Mailing Address 12 Deer Grass Ln

City

Acton

State

MA

Zip Code

01720-4755

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

President SRM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.87

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR78836515428

Amount of Each Receipt this Period

769.20

P/R Deduction (\$384.60 Monthly)

Full Name (Last, First, Middle Initial)

B. Wendy Schrag

Mailing Address 625 Medical Center Dr

City

Newton

State

KS

Zip Code

67114-8780

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director, Advocacy & Gov Affai

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR78837415428

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Robert P. Loeper

Mailing Address 10431 Oakbrook Dr

City

Tampa

State

FL

Zip Code

33618-5352

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR78837515428

Amount of Each Receipt this Period

153.84

P/R Deduction (\$76.92 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

983.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Allen Mills

Mailing Address 129 West Trade Street, Suite 1050

City State Zip Code
 Charlotte NC 28202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Group Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR78837915428

Amount of Each Receipt this Period

153.84

P/R Deduction (\$76.92 Monthly)

Full Name (Last, First, Middle Initial)

B. James Pearce

Mailing Address 5212 Blackhawk Dr

City State Zip Code
 Danville CA 94506-5863

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

RQM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR78838115428

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Monica Cobb

Mailing Address 5251 Dtc Pkwy Suite 500

City State Zip Code
 Greenwood Village CO 80111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Group Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR78839115428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

290.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Erma Hall

Mailing Address 3850 N Causeway

City State Zip Code
 Metairie LA 70002-4719

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Fresenius Medical Care NA

Occupation
 VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

988.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR78839615428

Amount of Each Receipt this Period

152.00

P/R Deduction (\$76.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Deborah Harvey

Mailing Address 1602 Hampton Oaks Bnd

City State Zip Code
 Marietta GA 30066-4451

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Fresenius Medical Care NA

Occupation
 Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3900.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR78839715428

Amount of Each Receipt this Period

600.00

P/R Deduction (\$300.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Donna McCarthy

Mailing Address 5251 DTC Parkway, Suite 500

City State Zip Code
 Greenwood Village CO 80111

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Fresenius Medical Care NA

Occupation
 Division President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2999.88

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR78839915428

Amount of Each Receipt this Period

461.52

P/R Deduction (\$230.76 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1213.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Liam Walsh

Mailing Address 5809 Chatham Ln

City State Zip Code
 The Colony TX 75056-7109

FEC ID number of contributing federal political committee.

C

Name of Employer
 Fresenius Medical Care NA

Occupation
 VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1742.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR78840015428

Amount of Each Receipt this Period

268.00

P/R Deduction (\$134.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Kim Sonnen

Mailing Address 240 S Madison St

City State Zip Code
 Denver CO 80209-3010

FEC ID number of contributing federal political committee.

C

Name of Employer
 Fresenius Medical Care NA

Occupation
 SVP Marketing & Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR78840115428

Amount of Each Receipt this Period

520.00

P/R Deduction (\$260.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Paul Zabetakis

Mailing Address 920 Winter Street
 Suite 303

City State Zip Code
 Waltham MA 02451

FEC ID number of contributing federal political committee.

C

Name of Employer
 Fresenius Medical Care NA

Occupation
 President, RRI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR78840515428

Amount of Each Receipt this Period

153.84

P/R Deduction (\$76.92 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

941.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Stephanie Curd

Mailing Address 1650 E. Greenville St, Suite H
Suite 10 C

City State Zip Code
Anderson SC 29621

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director, Home Therapies

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR78840615428

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Anthony Hayes

Mailing Address 100 Galleria Parkway, SE Suite 500
Suite 500 - 5th Floor

City State Zip Code
Atlanta GA 30339-7004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Group Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

806.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR78840715428

Amount of Each Receipt this Period

124.00

P/R Deduction (\$62.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Steven P Covino

Mailing Address 6 Williams Street

City State Zip Code
Waltham MA 02453-4131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR78849515428

Amount of Each Receipt this Period

192.32

P/R Deduction (\$96.16 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

336.32

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ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Carol A Ernst

Mailing Address 22370 N 64th Ave

City

Glendale

State

AZ

Zip Code

85310-4259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Area Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR78850015428

Amount of Each Receipt this Period

153.84

P/R Deduction (\$76.92 Monthly)

Full Name (Last, First, Middle Initial)

B. K. Brett Heiner

Mailing Address 874 West 1145 North

City

West Point

State

UT

Zip Code

84015-8876

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Distribution Center Manager II

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR78851015428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Matthew D KinserMailing Address 750 Old Hickory Blvd Suite 230
Suite 230

City

Brentwood

State

TN

Zip Code

37027-4528

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Managed Care

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR78851515428

Amount of Each Receipt this Period

153.84

P/R Deduction (\$76.92 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

347.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Donna M Painter

Mailing Address 105 W 7th Avenue Suite 1000
Suite 1000

City Corsicana State TX Zip Code 75110-6449

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR78852415428

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Charles E Brown

Mailing Address 4640 Glen Coe Street

City Leesburg State FL Zip Code 34748-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR78853615428

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Barry M Doherty

Mailing Address 13216 NE Salmon Creek Ave, Suite K

City Vancouver State WA Zip Code 98686

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Deployment Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR78853815428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Wm Gary Livesay

Mailing Address 520 10th Avenue South

City

Surfside Beach

State

MA

Zip Code

29575-3213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Area Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR78854315428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Mark R Fawcett

Mailing Address 100 Franklin Street

City

Arlington

State

MA

Zip Code

02474-3214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR78855815428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

Full Name (Last, First, Middle Initial)

C. Jessica Orlando

Mailing Address 93 Russell Street

City

Waltham

State

MA

Zip Code

02453-8510

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

299.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR78855915428

Amount of Each Receipt this Period

46.12

P/R Deduction (\$23.06 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

163.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. David Sweet

Mailing Address 2620 Old Shell Rd

City

State

Zip Code

Mobile

AL

36607-2921

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director, Operations

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR78856315428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Kimberly Grelle-Swint

Mailing Address 6100 Bandera Rd Suite 600
Suite 600

City

State

Zip Code

San Antonio

TX

78238-1667

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Director of Education

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

520.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR78856515428

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Nicole Devore

Mailing Address 801 Pennsylvania Ave NW Suite 225
Suite 225

City

State

Zip Code

Washington

DC

20004-2604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

499.98

Date of Receipt

12 / 31 / 2014

Transaction ID : PR78857515428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

196.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Jayme Patterson

Mailing Address 475 West 13th Street

City State Zip Code
 Ogden UT 84404

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR78859015428

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Judith Moran

Mailing Address 2201 South Clinton Ave 2nd Floor
2nd Floor

City State Zip Code
 South Plainfield NJ 07080-1473

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR78860015428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

Full Name (Last, First, Middle Initial)

C. Robert Sepucha

Mailing Address 920 Winter Street

City State Zip Code
 Waltham MA 02451

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR78860815428

Amount of Each Receipt this Period

769.24

P/R Deduction (\$384.62 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

926.16

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Sandra Geraci

Mailing Address 262 Berenger Walk

City State Zip Code
West Palm Beach FL 33414

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR78862915428

Amount of Each Receipt this Period

160.00

P/R Deduction (\$80.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Steven Parker

Mailing Address 475 West 13th Street

City State Zip Code
Ogden UT 84404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr. EHS Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR78863015428

Amount of Each Receipt this Period

31.00

P/R Deduction (\$15.50 Monthly)

Full Name (Last, First, Middle Initial)

C. Michael Ramsey

Mailing Address 4 Cubs Path

City State Zip Code
Hopkinton MA 01748

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR78863115428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

267.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Jacqueline Wenzler

Mailing Address 100 Galleria Parkway Suite 500
Suite 500

City State Zip Code
Atlanta GA 30339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR78863215428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Geronia F Parlier

Mailing Address 6100 Dutchmans Lane, 8th Floor

City State Zip Code
Louisville KY 40205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP UltraCare Customer Connection

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR79795915428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

Full Name (Last, First, Middle Initial)

C. Jenny Lee Fischer

Mailing Address 920 Winter Street

City State Zip Code
Waltham MA 02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR79796515428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

193.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Michelle Gazella

Mailing Address 920 Winter Street

City State Zip Code
Waltham MA 02451

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR79796715428

Amount of Each Receipt this Period

54.00

P/R Deduction (\$27.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Thomas C Graham

Mailing Address 920 Winter Street

City State Zip Code
Waltham MA 02451

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR79796815428

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Terry L Ketchersid

Mailing Address 920 Winter Street

City State Zip Code
Waltham MA 02451

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR79797615428

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

354.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Joseph Marino

Mailing Address 5251 Dtc Pkwy Suite 500

City State Zip Code
 Greenwood Village CO 80111-2734

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Fresenius Medical Care NA Sr Director, Joint Venture Ops

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 250.12

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR79797815428

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Monthly)

Full Name (Last, First, Middle Initial)

B. Manikandan Pandi

Mailing Address 920 Winter Street

City State Zip Code
 Waltham MA 02451

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Fresenius Medical Care NA Manager

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 499.98

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR79798315428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

Full Name (Last, First, Middle Initial)

c. Christopher Smith

Mailing Address 920 Winter Street

City State Zip Code
 Waltham MA 02451

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Fresenius Medical Care NA Manager

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 200.20

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR79798815428

Amount of Each Receipt this Period

30.80

P/R Deduction (\$15.40 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

146.20

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Catherine Dubinsky

Mailing Address 920 Winter Street

City

Waltham

State

MA

Zip Code

02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Operations Integrity

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR81310815428

Amount of Each Receipt this Period

153.84

P/R Deduction (\$76.92 Monthly)

Full Name (Last, First, Middle Initial)

B. Christopher Fonvielle

Mailing Address 920 Winter Street

City

Waltham

State

MA

Zip Code

02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR81310915428

Amount of Each Receipt this Period

48.00

P/R Deduction (\$24.00 Monthly)

Full Name (Last, First, Middle Initial)

C. William Fink

Mailing Address 32 Hartwell Ave

City

Lexington

State

MA

Zip Code

02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP, ITG

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR83067515428

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

401.84

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. John Mizerany

Mailing Address 5215 N. O'Connor Blvd

City State Zip Code
 Irving TX 75039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

GVP, Greater Texas Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR83067915428

Amount of Each Receipt this Period

32.00

P/R Deduction (\$16.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Keith Alderman

Mailing Address 5268 East Raines Road

City State Zip Code
 Memphis TN 38118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR87329915428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

C. James G Fowlds

Mailing Address 3545 Wilshire Blvd, Suite 103

City State Zip Code
 Los Angeles CA 91342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.35

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR87330215428

Amount of Each Receipt this Period

15.40

P/R Deduction (\$7.70 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Edda Spinelli

Mailing Address 511 N Brookhurst Street, Suite 100
Suite 100

City State Zip Code
Anaheim CA 92801

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2014

Transaction ID : PR87330315428

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Mignon Early

Mailing Address 124 Verdae Blvd

City State Zip Code
Greenville SC 29650

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2014

Transaction ID : PR87330415428

Amount of Each Receipt this Period

120.00

P/R Deduction (\$60.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Nancy Diane Carter

Mailing Address 1607 Revella Arch

City State Zip Code
Chesapeake VA 23322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Physician Contracting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2014

Transaction ID : PR93418915428

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. William Crawford

Mailing Address 100 Galleria Parkway, Suite 1200

City State Zip Code
 Atlanta GA 30339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR93419115428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

Full Name (Last, First, Middle Initial)

B. Katrina Demlow

Mailing Address 3300 Vista Way

City State Zip Code
 Oceanside CA 92056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.49

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR93419315428

Amount of Each Receipt this Period

46.20

P/R Deduction (\$23.10 Monthly)

Full Name (Last, First, Middle Initial)

C. Janice D Lindsay

Mailing Address 111 Elizabeth Street

City State Zip Code
 Clinton NC 28323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2014

Transaction ID : PR93420415428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

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163.12

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Deanna Patterson

Mailing Address 8688 Broadway

City
Merillville

State Zip Code
IN 46410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR93420815428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Steve Shaw

Mailing Address 920 Winter Street

City
Waltham

State Zip Code
MA 02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Vice President, HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR93420915428

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Paul Smith

Mailing Address 920 Winter Street

City
Waltham

State Zip Code
MA 02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director Biomedical Support Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR93421215428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Brent Clark

Mailing Address 4355 Cobb Pkwy, Suite J-405

City State Zip Code
 Atlanta GA 30339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Central Admissions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR93696115428

Amount of Each Receipt this Period

30.80

P/R Deduction (\$15.40 Monthly)

Full Name (Last, First, Middle Initial)

B. Drew David

Mailing Address 2282 Floral Ridge Drive

City State Zip Code
 Dacula GA 30019

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Market Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR93696415428

Amount of Each Receipt this Period

46.16

P/R Deduction (\$23.08 Monthly)

Full Name (Last, First, Middle Initial)

C. Mary Jo Davis

Mailing Address One Westbrook Corporate Ctr, Suite

City State Zip Code
 Westchester IL 60154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR93696515428

Amount of Each Receipt this Period

48.00

P/R Deduction (\$24.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

124.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. James Easterbrook

Mailing Address 4646 N Greenview Ave #10

City State Zip Code
Chicago IL 60640

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR93696615428

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Domenic Gaeta

Mailing Address 920 Winter Street

City State Zip Code
Waltham MA 02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR93697015428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

C. David Gillon

Mailing Address 100 Galleria Drive, Suite 500

City State Zip Code
Atlanta GA 30080

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director Market Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR93697215428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. George Higgins

Mailing Address 2824 N.Broadway

City

Pittsburg

State

KS

Zip Code

66762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR93697715428

Amount of Each Receipt this Period

30.80

P/R Deduction (\$15.40 Monthly)

Full Name (Last, First, Middle Initial)

B. Jeffrey Hymes

Mailing Address 750 Old Hickory Blvd, Suite 230

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR93697815428

Amount of Each Receipt this Period

400.00

P/R Deduction (\$200.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Gordon Jee

Mailing Address 32 Hartwell Ave

City

Lexington

State

MA

Zip Code

02421

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr Manager, Product Delivery

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR93698015428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

507.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Christine McLean

Mailing Address 920 Winter Street

City

Waltham

State

MA

Zip Code

02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager A/R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR93698615428

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Monthly)

Full Name (Last, First, Middle Initial)

B. Kristine Pace

Mailing Address 711 East Jefferson Street

City

Oak Grove

State

LA

Zip Code

71263

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR93698815428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

C. William Perry

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR93698915428

Amount of Each Receipt this Period

120.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

198.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. David Roder

Mailing Address 920 Winter Street

City State Zip Code
Waltham MA 02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR93699215428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Peter Sauer

Mailing Address 920 Winter Street

City State Zip Code
Waltham MA 02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

President - Fresenius Health Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1430.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR93699515428

Amount of Each Receipt this Period

220.00

P/R Deduction (\$110.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Linda Sherman

Mailing Address 12120 Plum Orchard Drive, Suite 14

City State Zip Code
Silver Spring MD 21710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Home Therapies Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR93699715428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Richard Van Zandt

Mailing Address 920 Winter Street

City State Zip Code
Waltham MA 02451

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Vice President - Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR93700015428

Amount of Each Receipt this Period

153.84

P/R Deduction (\$76.92 Monthly)

Full Name (Last, First, Middle Initial)

B. Bernadette Vincent

Mailing Address 3850 North Causeway Blvd, Suite 14

City State Zip Code
Metairie LA 70068

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Group Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR93700115428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

Full Name (Last, First, Middle Initial)

C. Barbara Williams

Mailing Address 5251 DTC Parkway, Suite 700

City State Zip Code
Greenwood Village CO 80111

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR93700215428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

307.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. David Cariello

Mailing Address 2219 Hollywood Blvd, Suite 101

City State Zip Code
Hallandale FL 33009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP of Real Estate & Construction Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR94193215428

Amount of Each Receipt this Period

153.84

P/R Deduction (\$76.92 Monthly)

Full Name (Last, First, Middle Initial)

B. Andrew Holstein

Mailing Address 630 West Germantown Pike, Suite 10

City State Zip Code
Plymouth Meeting PA 19462

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR94193315428

Amount of Each Receipt this Period

70.00

P/R Deduction (\$35.00 Monthly)

Full Name (Last, First, Middle Initial)

c. Douglas S Maggio

Mailing Address 950 Golfview Ct

City State Zip Code
Dacula GA 30019

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Director Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR94193515428

Amount of Each Receipt this Period

46.20

P/R Deduction (\$23.10 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Patrick McCarthy

Mailing Address 82 Belcher Dr

City State Zip Code
Sudbury MA 01776

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

SVP Sales & Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3120.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR94193615428

Amount of Each Receipt this Period

480.00

P/R Deduction (\$240.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Jayanta Ray

Mailing Address 5215 N. O'Connor Blvd, Suite 1100

City State Zip Code
Irving TX 75039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR94193715428

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Alex J Rosenblum

Mailing Address 5215 N. O'Connor Blvd, Suite 1100

City State Zip Code
Irving TX 75039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Quality Improvement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR94193815428

Amount of Each Receipt this Period

10.00

P/R Deduction (\$10.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

590.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Joseph Winslow

Mailing Address 920 Winter Street

City

Waltham

State

MA

Zip Code

02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Quality Systems & Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR94194115428

Amount of Each Receipt this Period

160.00

P/R Deduction (\$80.00 Monthly)

Full Name (Last, First, Middle Initial)

B. John Baldasaro

Mailing Address 32 Hartwell Ave

City

Lexington

State

MA

Zip Code

02421

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP ITG Revenue Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR94305115428

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Beth Britton

Mailing Address PO Box 113

City

Grantham

State

NH

Zip Code

03753

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

RN, Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR94305215428

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

320.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Maria Burke

Mailing Address 129 West Trade Street, Suite 1050

City	State	Zip Code
Charlotte	NC	28202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Strategic Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR94305315428

Amount of Each Receipt this Period

120.00

P/R Deduction (\$60.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Terri Carlton

Mailing Address 1534 N Hoskins Road

City	State	Zip Code
Charlotte	NC	28216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Area Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR94305415428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

Full Name (Last, First, Middle Initial)

C. Jason Grayson

Mailing Address 5100 N. Brookline Ave, Suite 275

City	State	Zip Code
Oklahoma City	OK	73112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR94306215428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

236.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 47
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Susan Raulie

Mailing Address 6100 Bandera Rd, Suite 600

City State Zip Code
 San Antonio TX 78236

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR94307015428

Amount of Each Receipt this Period

76.92

P/R Deduction (\$38.46 Monthly)

Full Name (Last, First, Middle Initial)

B. James W Swann

Mailing Address 3725 National Drive, Suite 130

City State Zip Code
 Raleigh NC 27612

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Development & Certificate of Need

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR94307315428

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Constance Torrey-Romanus

Mailing Address 3300 N. Main Street

City State Zip Code
 Peoria IL 61611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Area Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.78

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR94307415428

Amount of Each Receipt this Period

46.12

P/R Deduction (\$23.06 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

163.04

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Michael Tully

Mailing Address 920 Winter Street

City

Waltham

State

MA

Zip Code

02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Mgr Corp Systems

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		3	1		2	0	1	4		

Transaction ID : PR94307515428

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Carolyn Latham

Mailing Address 750 Old Hickory Blvd, Suite 230

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		3	1		2	0	1	4		

Transaction ID : PR99993915428

Amount of Each Receipt this Period

153.84

P/R Deduction (\$76.92 Monthly)

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

213.84

TOTAL This Period (last page this line number only)..... ►

14967.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 OF 47

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Fresenius Medical Care North America

Mailing Address 920 Winter Street

City

Waltham

State

MA

Zip Code

02451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1984.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 09 / 2014

Transaction ID : 8868953

Amount of Each Receipt this Period

431.05

Reimbursement of Bank Fees

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

431.05

431.05

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Fresenius Medical Care North America PAC

A. Comerica Bank

Mailing Address PO Box 75000

City	State	Zip Code
Detroit	MI	48275-0001

Purpose of Disbursement	Bank Service Charge

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : 8868954

Amount of Each Disbursement this Period

162.28

Bank Service Charge

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

162.28

162.28

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Turquoise PACMailing Address 1050 17th Street, NW
Suite 590

City Washington State DC Zip Code 20036

Purpose of Disbursement
Direct Contribution

Candidate Name

Turquoise PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2014

Transaction ID : 8851140

Amount of Each Disbursement this Period

1000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. Bluegrass Committee

Mailing Address 220 1/2 E Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Direct Contribution

Candidate Name

Bluegrass CommitteeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2014

Transaction ID : 8868904

Amount of Each Disbursement this Period

5000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

6000.00
